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TRANSMITTAL FORM		Application Number	
(to be used for all correspondence after initial filing)		09/421,545	
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		First Named Inventor	
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		Group Art Unit	
		1651	
		Examiner Name	
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		Attorney Docket Number	
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ENCLOSURES (check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	MORRISON & FOERSTER LLP Laurie L. Hill - 51,804
Signature	<i>Laurie L. Hill</i>
Date	5-5-03

I hereby certify that this correspondence is being Hand Delivered to: Examiner Ralph Gitomer, 1911 So. Clark Place, Crystal Mall I, Arlington, Virginia, 22202, on the date shown below.

Dated: 5/6/03 Signature: *Annette Masieello* (Annette Masieello)